

U.S. Department of Justice
Bureau of Alcohol, Tobacco, Firearms and Explosives

Application to Make and Register a Firearm

(Submit in duplicate. See Instructions attached.)

To: National Firearms Act Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Suite 1250, Martinsburg, West Virginia 26001
The undersigned hereby makes application, as required by Sections 5821 and 5822 of the National Firearms Act, Title 26 U.S.C., Chapter 53, to make and register the firearm described below.

2. Application is made by:

☐ Individual ☒ Corporation or Other Business Entity ☐ Government Entity

3a. Trade Name (If any)

3b. Applicant's Name and Mailing Address (Type or print below and between the dots)

Jay Aubrey Isaac Hollis Revocable Living Trust
5344 County Road 3229
Lone Oak, Texas 75453

3c. If P.O. Box is Shown Above, Street Address Must Be Given Here

3d. County
Hunt

3e. Telephone Area Code and Number
903-268-0106

4. Description of Firearm (complete items a through i)

a. Name and Location of Original Manufacturer of Firearm (Receiver) (If prototype, furnish plans and specifications) (See Instruction 2i)

SPIKE'S TACTICAL, APOPKA, FL.

b. Type of Firearm to be made (See instruction 1c)

Machinegun

c. Caliber, Gauge or Size (Specify)

.300

1. Type of Application

☒ a. Tax Paid, check or to the Dept. approval; acquire, a "National"

☐ b. Tax Exempt because firearm is being made on behalf of the United States, or any department, independent establishment, or agency thereof.

☐ c. Tax Exempt because firearm is being made by or on behalf of any State or possession of the United States, or any political subdivision thereof, or any official police organization of such a government entity engaged in criminal investigations.

d. Model

ST15

Length (Inches)

e. Of Barrel: 8

f. Overall: 28.5

g. Serial Number (See instruction 2i.)

RM-34755

h. Additional Description (Include all numbers and other identifying data which will appear on the firearm)

i. State Why You Intend To Make Firearm (Use additional sheet if necessary)

To enhance collection and all lawful purposes.

j. Is this firearm being reactivated? ☐ Yes ☒ No (See Definition 1k)

5. Applicant's Federal Firearms License (If any)
(Give complete 15-digit Number)

6. Special (Occupational) Tax Status (If applicable)

a. Employer Identification Number

b. Class

Important: All individual applicants (including Federally Licensed Collectors) must complete the reverse side of this form and submit, in duplicate, FBI Form FD-258, Fingerprint Card.

Under Penalties of Perjury, I Declare that I have examined this application, including accompanying documents, and to the best of my knowledge and belief it is true, accurate and complete and the making and possession of the firearm described above would not constitute a violation of Chapter 44, Title 18, U.S.C., Chapter 53, Title 26, U.S.C., or any provisions of State or local law.

7. Signature of Applicant

Jay Aubrey Isaac Hollis grantor

8. Name and Title of Authorized Official of Firm or Corporation (if applicable)

Jay Aubrey Isaac Hollis grantor

9. Date

20140514

The space below is for the use of the Bureau of Alcohol, Tobacco, Firearms and Explosives

By authority of the Director, Bureau of Alcohol, Tobacco, Firearms and Explosives, this application has been examined and the applicant's making and registration of the firearm described above is:

☒ Approved (With the following conditions, if any)

☐ Disapproved (For the following reasons)

Authorized ATF Official

[Signature]

Date

SEP 08 2014

Additional Requirements

Important: Give full details on separate sheet for all "Yes" answers in items 10 and 11

10. Are You:	Yes	No	11. Have You:	Yes	No
a. Charged by information or under indictment in any court for a crime for which the judge could imprison you for more than one year. An information is a formal accusation of a crime made by a prosecuting attorney.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Been convicted in any court of a crime for which the judge could have imprisoned you for more than one year, even if the judge actually gave you a shorter sentence?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. A fugitive from justice?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. An alien who is illegally in the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Been adjudicated mentally defective or been committed to a mental institution?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Under 21 years of age?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Renounced your United States citizenship?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. An unlawful user of or addicted to, marijuana, or any depressant, stimulant, or narcotic drug, or any other controlled substance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Been convicted in any court of a misdemeanor crime of domestic violence? (see instruction 1m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Subject to a court order restraining you from harassing, stalking or threatening an intimate partner or child of such partner? (see instruction 7c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

12. Photograph

Affix
Recent Photograph Here
(Approximately 2" x 2")
(See instruction 2d)

13. Law Enforcement Certification (See instruction 2f)

I certify that I am the chief law enforcement officer of the organization named below having jurisdiction in the area of residence of

(Name of maker)

I have no information indicating that the maker will use the firearm or device described on this application for other than lawful purposes. I have no information that Possession of the Firearm described in Item 4 on the Front of this Form would place the maker in Violation of State or Local Law.

(Signature)

(Printed name)

(Title and agency name)

(Street address, city, State and zip code)

(Telephone Number)

(Date)

By (if delegated authority to sign for the chief law enforcement official):

(Signature)

(Printed name)

(Title and agency name)

(Street address, city, State and zip code)

(Telephone Number)

(Date)

Important Information for Currently Registered Firearms

If this registration document evidences the current registration of the firearm described on it, please note the following information.

Estate Procedures: For procedures regarding the transfer of firearms in an estate resulting from the death of the registrant identified in item 3, the executor should contact the NFA Branch, Bureau of ATF, 244 Needy Road, Martinsburg, WV 25405.**Interstate Movement:** If the firearm identified in item 4 is a machinegun, short-barreled rifle, short-barreled shotgun, or destructive device, the registrant may be required by 18 U.S.C. § 922(a)(4) to obtain permission from ATF prior to any transportation in interstate or foreign commerce.**Change of Description or Address:** The registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, of any change to the description of the firearms in item 4, or any change to the address of the registrant.**Restrictions on Possession:** Any restriction (see approval block on face of form) on the possession of the firearm identified in item 4 continues with the further transfer of the firearm.**Persons Prohibited from Possessing Firearms:** If the registrant becomes prohibited by 18 U.S.C. § 922 from possessing a firearm, the registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, immediately upon becoming prohibited for guidance on the disposal of the firearm.**Proof of Registration:** This approved application is the registrant's proof of registration and it shall be made available to any ATF officer upon request.